U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory inder P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E	
1. File Number U - 518	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Charles Wright	Name Ironworkers Local 7
	Labor Organization File Number 033-092
P.O. Box, Bldg., Room No., if any P.O. Box 7	P.O. Box, Building and Room Number, if any P.O. Box 7
Street 195 Old Colony Avenue	Street 195 Old Colony Avenue
City South Boston	City South Boston
State Massachusetts ZIP Code + 4 02127	State Massachusetts ZIP Code + 4 02127
5. Position in labor organization. Business Agent	
Enter appropriate data below if during the past fiscal year you arreas and	an arminar shild directly are adjusted to be decreased to be decreased.
Enter appropriate data below if, during the past fiscal year, you or your spot (except as specified in the exclusion). A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.	sions set forth in the instructions):
(except as specified in the exclusion (except as specified in the exclusion). A. Held an interest in engaged in transactions (including loans) with or	sions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or o monetary value from an employer whose employees your organization.	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any).	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
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A. Held an interest in, engaged in transactions (including loans) with, or omenatary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any:	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
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(except as specified in the exclusion of	lerived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and is, to the best of the
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signature and verification. The undersigned declares, under penalty of its submitted in this report (including the information contained in any accompany)	lerived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 2. Perjury and other applicable penalties of the law, that all of the information and documents), has been examined by the signatory and is, to the best of the

Name of Person Filing Charles Wright	F	ile Number U-		
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or included the pour labor organization or with a trust in which your labor organization.	wise dealing with the business yely seeking to represent, or lirectly to, or otherwise			
8. Name and address of Business (including trade name, if any).	9. Business deals with:			
Name Iron Workers District Council LMCT				
Trade Name, if any:	a. Labor Organization b. Trust	1		
P.O. Box, Bldg., Room No., if any	c. Employer			
Street 191 Old Colony Avenue	tarrents C. Employer			
City South Boston				
State Massachusetts ZIP Code + 4 02127				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	model and consequence on the consequence of the con		
Name	Iron Workers District Council LMCT is a Taft-Hartle Trust that is funded from contributions made pursuant to collective bargaining agreements betwee Iron Workers Local 7 and various signatory construction employers.			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street	11.b. Approximate dollar value of	of such dealing.		
City	12.a. Nature of interest held or	Section measure in control to an interest of control control control control and a female in a control		
State ZIP Code + 4	Meeting related trav	el, meals and lodging.		
	12.b. Amount.	\$1,426		
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		-		
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.			
(including trade name, if any). Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State ZIP Code + 4 ZIP Code + 4				
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.			

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Name of Person Filing Charles	Wright	File Number U -

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Local 7 Apprentice Training Committee	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 191 Old Colony Avenue	c. Employer	
City South Boston		
State Massachusetts ZIP Code + 4 02127		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Local 7 Apprentice Training Committee is a Taft- Hartley Trust that is funded from contributions	
Trade Name, if any:	made pursuant to collective bargaining agreements between Iron Workers Local 7 and various construction employers.	
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	Meeting related meal.	
	12.b. Amount. \$147	

Name of Person Filing Charles	Wright	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name James M. Langan, Jr.	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 33 Broad Street	c. Employer	
City Boston		
State Massachusetts ZIP Code + 4 02109		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Iron Workers District Council H&W Fund	Mr. Langan is the attorney for Taf Funds that are associated with Iro	t-Hartley Trust on Workers Local
Trade Name, if any:	7.	
P.O. Box, Bldg., Room No., if any		
Street 161 Granite Avenue		
City Dorchester		
State Massachusetts ZIP Code + 4 02124	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	MATRICAL SERVICE CONTRACTOR OF THE SERVICE C
	Meeting related meal.	
	12.b. Amount.	\$78